

Women's Giving Circle 2025 Grant

The Community Foundation of Frederick County

Instructions

The Women's Giving Circle of Frederick County (WGC) is offering grants to support programs that empower Frederick County women (ages 18 and over) experiencing challenging situations. Organizations offering projects or programs that meet this objective are eligible to apply for funding in 2025.

If you have questions about the application process or using the application portal, please contact the Community Foundation of Frederick County.

Grant Details:

Total Funding Available: \$280,000

Minimum Grant Request: \$1,000 per proposal.

Maximum Grant Request: \$40,000 per proposal

Number of proposals per organization: Up to 4 proposals with a sum total of no more than \$40,000.

Grant Timeline:

Applications Open: February 1, 2025 at 12:00 AM

Applications Close: February 28, 2025 at 11:59 PM

Notification of Grant Selection and Funding Amount: Beginning April 25th, 2025

Women's Giving Circle Grant Awards Reception: Wednesday, June 4, 2025

Grant Period: July 1, 2025 to June 30, 2026. All activities under this grant must be completed within the grant period.

Reporting Requirements (*sent to the Community Foundation of Frederick County*):

Interim Report: due on January 31, 2026

Final Report: due on August 15, 2026.

Tips for a Successful Application

Grants will be discussed, evaluated, and awarded based on the information provided in this application. No site visits or interviews will occur and reviewers will not be encouraged or expected to do additional research into your project, program, or organization.

Stay organized: Read the entire application before responding to any questions. Focus on how your project aligns with the mission of the Women's Giving Circle and our funding priorities. Ensure your project meets all requirements before submitting your application.

Be clear, complete, and concise: Include all necessary details to fully answer the questions. Ensure your answers are easy to follow. Be sure to follow all formatting guidelines such as word or character limits. Avoid adding unnecessary or repetitive information across questions.

Support with evidence: Where possible, provide quantitative data, specific evidence, or qualitative examples that supports your project's goals and impact.

Proofread: Double check your application for clarity, accuracy, and completeness before submitting.

Funding Categories for the 2025 Grants Cycle

The Women's Giving Circle (WGC) is focused on **supporting women in Frederick County who are experiencing challenging situations**. In the past, we have supported initiatives that address the following areas. *Note: this list is in alphabetical order and not order of priority. It is not an exhaustive list.*

- **Advocacy and Access**
 - Legal services
 - Systems navigation for access to benefits (e.g. Earned Income Tax Credit (EITC), healthcare, housing vouchers)
- **Basic Needs**
 - Clothing
 - Food security
 - Hygiene supplies and support
- **Education**
 - Literacy and English proficiency courses
 - Scholarships and financial support
 - Tutoring programs
- **Family Services**
 - Child care assistance specifically to enable access to workforce empowerment or educational opportunities
 - Family support programs
 - Life skills training
 - Programs that support women or families during emergencies, such as natural disasters, domestic violence, or other crises.
- **Financial Services**
 - Budgeting and financial literacy training and credit score management/repair

- First-time homebuyer programs and low-income homebuyer support services
- **Health**
 - Access to health services such as physical, dental, vision, and mental health
 - Aging and aging-in-place services
 - Assistive devices
 - Trauma-informed care
 - Substance abuse prevention and recovery support
- **Housing**
 - Emergency and transitional housing support, including rental assistance, shelters, and recovery programs
 - Homelessness prevention and support services
 - Home repairs
 - Utilities assistance
- **Organization Infrastructure** (to strengthen the capacity of organizations that serve women)
 - Facility improvements
 - Materials and supplies
 - Program staffing or training
 - Technology investments to enhance services and programs
- **Transportation**
 - Car repair and affordable ownership services
 - Gas, rideshare, and public transit vouchers
- **Workforce Empowerment**
 - Career mentorship
 - Job training
 - Professional certifications, trade and technical certifications including apprenticeships
 - Skill development
 - Workforce placement services

Qualifying Conditions

To be considered for funding through the WGC, your program must meet the following conditions. If you answer **No** to any of the questions below, **do not continue and do not submit** this application as the project is not eligible for funding.

Serving Women*

Does your organization certify that 100% of the funds awarded through this grant will be used to support women? *Note: While your organization, project, or program may also serve other populations, WGC funds must only be used for the portion (percentage) of the program that directly and exclusively benefits women. WGC funding cannot exceed the percentage of the total program costs that serve women. For example, if only 70% of your program participants are women, no more than 70% of the program's costs can be funded by WGC.*

Choices

Yes

No

Challenging Situations*

Does your organization certify that 100% of the funds awarded through this grant will be used to support women facing challenging situations? *Note: While your organization, project, or program may also serve other populations, all funds from WGC must directly and solely support women experiencing challenging situations. For the purposes of this grant, "challenging situations" refers to factors such as poverty, domestic violence, homelessness, discrimination, lack of access to education or healthcare, or other similar hardships as noted in the funding categories above.*

Choices

Yes

No

Nondiscrimination Certification*

Does your organization certify that participation in this program or project will be open to all women, regardless of race, ethnicity, national origin, religion, sexual orientation, gender identity, disability, marital status, age, or any other protected characteristic? *Note: While the WGC funds programs specifically supporting women, organizations may not impose additional requirements, such as adherence to a particular faith, to participate in the program.*

Choices

Yes

No

Frederick County Residents*

Does your organization certify that 100% of the funds awarded through this grant will be used to serve residents of Frederick County, MD? *Note: While your organization, project, or program may also serve other populations, all funds from WGC must directly and solely support Frederick County residents. A "resident" is defined as someone who has lived in Frederick County for 30 or more consecutive days.*

Choices

Yes

No

Frederick County Operations*

Does your organization certify that you have a physical office, mobile unit, or consistent operations in Frederick County, MD, from which this program or project will operate? *Note: While your organization may also serve other populations, all funds from WGC will directly and solely support organizations with permanent or ongoing operations in Frederick County.*

Choices

Yes

No

Verification Methods*

Describe the process your organization will use to ensure that services are directly and solely provided to women in challenging situations as well as how you will verify that recipients meet the Frederick County residency requirement.

Character Limit: 2500

Scholarship Acknowledgment*

If this project includes scholarships, does your organization certify that recipients will be informed that funding is fully or partially provided by the WGC? Acknowledgment of WGC as a funding source must also be included, where appropriate, in related communications or materials (e.g., promotional materials, press releases, or events).

Choices

Yes

No

This project does not include scholarships

Project Information

In this section, we ask for a comprehensive description of your proposed project. This is your opportunity to share how your project will address the needs of women in Frederick County who are experiencing challenging situations, and how your project aligns with the WGC's funding priorities above. Please be sure to respond clearly and address each question completely. *Note, portions of your responses may be shared publicly if your project receives funding.*

Project Name*

Enter a concise and descriptive name for this request. This name should be unique from other applications you submit during this grant process.

Character Limit: 100

New or Existing Project*

Is this request for a new project, program, service, or expansion of service? Select the best option.

Choices

Yes, this is or will be a new project or program

No, this is an existing project or program, but it includes expansion or a new component.

No, this is an existing project or program.

Existing Project

If this request is for an existing project or program and how many years has it been in operation?

Character Limit: 250

Project Lifecycle*

How will this project, program, or service continue or recur?

Choices

This is a one-time or limited-time project that is NOT intended to continue.

This is an ongoing project that is intended to continue.

Other (please specify):

Other:

Character Limit: 250

Project Purpose*

Please explain the purpose of your project in one to two sentences.

Character Limit: 250

Project Alignment with the WGC Mission*

In a few sentences, explain how this project aligns with the objective to: “empower Frederick County women experiencing challenging situations.” Include challenges that the women served by this grant face.

Character Limit: 1000

Project Category*

Select the category that best describes the focus of your project.

If your project falls into more than one category, please choose the category where the majority of the work and impact aligns.

If you’re unsure, select the category that most closely reflects your project’s primary goal or focus.

Choices

Advocacy and Access

Basic Needs

Education

- Family Services
- Financial Services
- Health
- Housing
- Organization Infrastructure
- Transportation
- Workforce Empowerment
- Other (please specify)

Other:

Character Limit: 100

Project Alignment with Funding Categories*

In a few sentences, explain how your project aligns with and addresses one or more of the funding categories listed above.

Character Limit: 1000

Grant Support Categorization*

Select all the options that apply to how the WGC funds will support your project. Be sure to provide more details in the project description and the Funding and Budget sections below.

Choices

- Administrative or General Operating Expenses (e.g., overhead, accounting, insurance)
- Direct Participant Support (e.g., scholarships, direct care, utility payment, vehicle repairs, etc.)
- Event-Related Costs (e.g., venue rental fees, refreshments, event-specific supplies)
- Facility Costs (e.g., enhancements, utilities, maintenance)
- Program Materials and Supplies (e.g., printing, materials, consumables)
- Outreach and Marketing Expenses (e.g., flyers, ads, awareness campaigns)
- Research and Evaluation (e.g., surveys, data collection, impact measurement tools)
- Staffing and Personnel Costs (e.g., salaries, stipends, temporary staff, Certifications)
- Technology and Equipment (e.g., software, hardware, IT tools)

Other:

Other:

Character Limit: 250

Project Description - Overview*

Provide a detailed explanation of the program, project, or request. Include the following elements if applicable:

Primary Goal: What is the main objective or outcome the project aims to achieve?

Activities/Deliverables: Describe the key actions, services, or products that will be provided. Be specific.

Grant Support Impact: Provide a clear breakdown or details of how WGC funds will be allocated and what outcomes they will drive within the project.

Collaborations: Does your project involve collaborations with other organizations? How do these partnerships impact your program or support of the program?

Character Limit: 5000

Location of Project*

Provide the address where the majority of the project's services will be delivered. (Address, City, State and Zip code)

Character Limit: 250

Project Timeline*

The project period for WGC Grants is July 1, 2025 to June 30, 2026. Provide a concise timeline for your project, including key milestones. Be specific about dates or time frames whenever possible.

Character Limit: 3000

Project Impact - Women Served*

How many women in challenging situations do you expect to benefit, both directly and indirectly?

Provide a breakdown by service or activity if applicable.

Character Limit: 1500

Project Impact - Measurable Outcome*

Describe the expected outcomes of your program and its long-term effects on both the individuals served and the broader community.

- What specific metrics or outcomes will you use to measure success? Explain the tools and processes you'll use and when measurements will take place.
- What long-term benefits or changes do you anticipate as a result of this program?

For existing programs, reference previous evaluations.

For new programs, describe the expected trends during the grant period.

Character Limit: 2000

Budget Information

Amount Requested*

Enter the dollar amount you are requesting for this project. (*Minimum \$1,000; maximum \$40,000.*)

Organizations may submit up to four proposals with a total request not exceeding \$40,000 across all proposals

Character Limit: 20

Project Expenses Total*

Please provide the total amount of all project expenses.

Character Limit: 20

Grant Request as a Percentage of Total Project Expenses*

Please calculate the percentage of your grant request against the total amount of all project expenses.

Character Limit: 20

Minimum Funding*

Please provide the minimum amount of funding this project can receive from the WGC and still move forward.

Character Limit: 20

Minimum Funding Project Change*

If funding were supplied at the minimum amount, what key aspects would be adjusted or changed?

Outline any major differences in scope, services, or deliverables.

Character Limit: 900

Implementation Plan without Women's Giving Circle Funds*

Please explain how or if this project will be implemented without WGC funding.

Explain how or whether the project would continue, and what adjustments would be made in the absence of this funding.

Character Limit: 300

Project Budget*

Please upload a budget for your project in Microsoft Excel or PDF, including all sources of proposed income by line item and proposed expenses by line item. Your uploaded budget should clearly identify which expenses will be funded with this WGC grant. Be sure to note pending and awarded grants, and in-kind and received contributions. A sample budget can be found ([HERE](#)). Applications without properly prepared budgets will not be considered.

Please use the text box to provide background or explanation of unique features of your budget.

Character Limit: 300 | File Size Limit: 5 MB

Prior Funding*

To your knowledge, have you received prior grant support from the WGC? Select the best answer.

Note: All applications will be evaluated based on current criteria and merit. Past funding is not an indication of future support.

Choices

No: This is our first time applying for WGC funding

No: We have applied before, but not received funding

Yes: We have received WGC funding

Yes: We and this specific project or program have received WGC funding

Unknown

Funding Sustainability Plan for Project Lifecycle

Sustainability addresses how your organization may ensure the program or its benefits continue beyond the grant period and WGC funding.

For projects intended to continue, address the following:

- Can you sustain the program if WGC funding is not available in future years?
- What alternative funding sources or strategies will you pursue to ensure the program continues without relying solely on WGC support?
- If your project involves funding for staff, how will you transition the funding of that position(s) in future years
- How will the program be integrated or maintained as part of your regular operations, long-term goals, and budgeting?

For one-time or limited-time projects:

- Enter "N/A: one-time or limited-time project"

Character Limit: 5000

Organizational Information

For this section of the application, the Community Foundation is utilizing **GuideStar for Grant Applications (G4G)**. If your organization has claimed and completed its profile on Guidestar.org, you will be able to fill in fields below with just a couple clicks of a button.

Scroll back to the top of the application and click the Copy GuideStar Profile button in the upper right corner. Choose from a table of available questions and those fields will automatically populate. ***You will be able to modify these answers.*** Selecting the Copy GuideStar Profile button will not overwrite any previously provided responses in your application. Responses in your application will not update your GuideStar profile.

Please provide financial information for your most recently completed fiscal year.

Your Organization's Mission Statement*

Character Limit: 1000

Your Organization's Fiscal Year Start (Month and Date)*

Character Limit: 50

Your Organization's Total Assets (Last Fiscal Year)*

Character Limit: 20

Your Organization's Total Liabilities (Last Fiscal Year)*

Character Limit: 20

Your Organization's Net Assets End of Last Fiscal Year*

Character Limit: 20

Your Organization's Total Revenue (Last Fiscal Year)*

Character Limit: 20

Your Organization's Total Expenses (Last Fiscal Year)*

Character Limit: 20

Audit, Reviewed Financial Statement, or Financial Form Upload*

Please provide one of the following documents depending on the amount of your organization's annual charitable contributions **for the most recently completed fiscal year**:

- Nonprofits with annual charitable contributions less than \$300,000 complete a prescribed financial form (HERE). Quasi-governmental, faith-based, and civic organizations and organizations who are chapters of a "parent" organization must also complete this financial form if they do not have their own audit or independent financial review.
- Nonprofits with charitable contributions over \$300,000 but less than \$750,000 upload a financial review performed by an independent certified public accountant.
- Nonprofits with charitable contributions over \$750,000 must upload an audit performed by an independent certified public accountant.

File Size Limit: 10 MB

Staff List*

Please upload a list that contains the names of your organization's key leadership staff and titles. If explanation is needed, use field below.

Character Limit: 1000 | File Size Limit: 5 MB

Governing Board List*

Please upload a document that lists your current governing board (Board of Directors, Board of Trustees, etc.)

Character Limit: 1000 | File Size Limit: 2 MB

Contact Information

Primary Contact for Follow-Ups

Who at your organization will serve as the primary point of contact throughout the grant process? This may include being contacted in regards to funding decisions, the awards ceremony, and any other opportunities related to this grant. It is critical that this person be aware of the grant application and corresponding project, and be responsive and knowledgeable about your organization.

Full Name*

Character Limit: 250

Title/Role

Character Limit: 250

Email Address

Character Limit: 254

Phone Number

Character Limit: 20

Preferred Method of Contact

Choices

Email

Phone

Relationship to Project

Character Limit: 250

Organizational Focus

Questions in the Data section are part of a data project being done by funders in Frederick County. The goal is to identify gaps in funding in our community. Answers to these questions will not impact your organization's eligibility for this grant opportunity.

Fiscal Sponsor

Is your organization fiscally sponsored by another entity?

Choices

Yes

No

Applicant Staff Size

Choices

- None
- 1 to 5
- 6 to 15
- 16 to 50
- 51 or more
- Unknown

Applicant Budget

Choices

- Up to \$100,000
- \$100,001 to \$250,000
- \$250,001 to \$500,000
- \$500,001 to \$1,000,000
- \$1,000,001 to \$5,000,000
- \$5,000,001 or more
- Unknown

Frederick Specific

Does this grant serve only Frederick County?

If the grant will serve Frederick County as well as other counties, please answer No.

Choices

- Yes
- No
- Unknown

Continuity

Indicate whether this grant serves a new or ongoing activity.

Choices

- New
- Ongoing

Topic/Issue

Please select only **one** option from the following list. If your work could reasonably fall into more than one category, use your best judgement to decide which category you would prefer to use for this grant request.

For more complete details about what types of work belong in each category, click here.

Choices

- Animal Welfare
- Arts and Culture

- Civic, Public Affairs, and Governance
- Community/Economic Development
- Disaster Response
- Education-Early Childhood
- Education-K to 12
- Education-College
- Education-Beyond College
- Environment
- Historic Preservation
- Education-Multiple
- Human Needs-All
- Human Needs-Employment/Job Training
- Human Needs-Family Stability
- Human Needs-Financial Services
- Human Needs-Food
- Human Needs-Health-Physical
- Human Needs-Health-Mental
- Human Needs-Health-Substance Use/Addiction
- Human Needs-Housing
- Human Needs-Human Rights
- Human Needs-Other Income Supports/Benefits
- Human Needs-Personal Safety
- Human Needs-Personcare
- Human Needs-Person Hosting
- Human Needs-Services Navigation
- Human Needs-Telecommunications
- Human Needs-Transportation
- Other
- Personal Development
- Public Services-Libraries and Information
- Public Services-Other Public Facilities and Amenities
- Public Services-Parks and Recreation
- Public Services-Public Safety
- Religion
- Science
- Sport and Athletics
- Unknown
- Not Applicable

Media Usage

Name of Media/Public Relations Representative

Provide the name and contact information of your organization's media/public relations representative.

Full Name

Character Limit: 250

Title/Role

Character Limit: 250

Email Address

Character Limit: 254

Phone Number

Character Limit: 25

Preferred Method of Contact

Choices

Email

Phone

Publicizing Grant

If awarded, please select the options how you would acknowledge the grant made possible by the generosity of the members of the WGC.

Choices

Attending the Grants Award Reception to celebrate funding with our membership.

Publicly thanking WGC in press releases or media coverage related to the project.

Mentioning WGC's support on your website, social media, email, or other promotional platforms.

Including the WGC's logo on program materials at events or your place of business.

Telling recipients or program participants that support was provided by WGC.

Other:

Other:

Character Limit: 250

Due Diligence Attestation and Grant Application Certification

The Community Foundation will verify your organization's compliance with the State of Maryland. Each organization is responsible for maintaining its compliance with the State of Maryland. If the State's two online databases show your organization is not currently in compliance with each division at the time you submit your application, the application may not be considered.

Compliance with Maryland Solicitations Act*

Is your organization currently in compliance (registered and in good standing) with the State of Maryland Solicitations Act? Check [HERE](#)

Choices

Yes

No

Exempt - Religious Organization

Exempt - Government/Quasi-Government Organization

Exempt - Civic Organization

Maryland Department of Assessments & Taxation Personal Property Return*

Is your organization current with the State of Maryland Personal Property Return filing? Check [HERE](#)

Choices

Yes

No

Exempt- Religious Organization

Exempt- Government/Quasi-Government Organization

Exempt - Civic Organization

Name of Applicant*

Please type the full name of the person completing the application for the organization.

Character Limit: 50

Title of Applicant*

Please type the title of the person completing the application for the organization.

Character Limit: 50

Name of Chief Professional Officer*

Please type the full name of the Chief Professional Officer for the applying organization. This attestation confirms that this named person has given consent for the organization to apply for funding from the WGC.

Character Limit: 100

Thank you for taking the time to complete and review this application. It is the mission of the Women's Giving Circle to champion the power of collective giving and award funds that empower Frederick County women experiencing challenging situations. We sincerely appreciate the hard work and dedication that local nonprofits and organizations provide to women in our community.

Once the application period has closed, the Women's Giving Circle Grants Committee will carefully consider all eligible applications.

If your program is selected for a grant, a representative from the Women's Giving Circle will reach out to the Primary Contact listed above. All recipients will be invited to attend the Grant Awards Reception in June, where you will have the opportunity to connect with other grant recipients and the Women's Giving Circle membership.

If your application is not selected for funding, you will be notified directly by the Community Foundation of Frederick County. You may ask the Community Foundation for more information about the process and decision at that time.

For more information about our organization and membership, please visit our website at www.frederickwgc.org. All are welcomed and encouraged to join or attend events, no invitation is required.